

# JACOB SILVER

Attorney at Law

26 Court Street  
Suite 1201  
Brooklyn, N.Y. 11242  
(718) 855-3834  
Fax: (718) 797-4141

## BANKRUPTCY CHECKLIST

Chapter 13

Chapter 7

\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Interview Date

\_\_\_\_\_  
Co-Debtor Name  NONE

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
County of Residence

\_\_\_\_\_  
Address - Including Apt.#

Lived at this Address for Over 6 Months?  No  Yes

\_\_\_\_\_  
Home Telephone Number

\_\_\_\_\_  
Work Telephone Number

\_\_\_\_\_  
Cell Phone Number

\_\_\_\_\_  
E-mail Address

Lived in New York State for Over 2 Years?  No  Yes

Have you Ever Filed Bankruptcy Before?  No  Yes

Are You:  Single  Married  Divorced  Separated  Widowed

Does Anyone Else Live with you in your Home?  No  Yes

List their Name, Sex, Age, and Relationship: \_\_\_\_\_

Do Any of them Regularly Contribute to the Support of your Household?  No  Yes

Did You Ever Own a  House  Land  Co-Op  Condo  Timeshare  
 NONE

Names of Owners: \_\_\_\_\_

Property Address: \_\_\_\_\_

Purchase Price: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Current Market Value of the Property: \_\_\_\_\_

Total First Mortgage Amount: \_\_\_\_\_

Second Mortgage Amount: \_\_\_\_\_ Date of Second Mortgage: \_\_\_\_\_

Do you want to Keep this Property?  No  Yes

Did anyone Ever put your name on a real property deed?  No  Yes

Did you Ever Co-Sign a Mortgage or Loan for anyone?  No  Yes

**Do You:** Own or Lease a Vehicle? NONE: Year & Model \_\_\_\_\_

Name & Address of Creditor: \_\_\_\_\_

Purchase Price: \_\_\_\_\_ Vehicle Mileage: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Current Market Value of the Vehicle: \_\_\_\_\_

Total Amount of Loan on the Vehicle: \_\_\_\_\_ No Loan

Do you want to Keep this Vehicle? No Yes

Do you have a Pension Plan Annuity 401K IRA? NONE

**How much Money in Total is in All of your Bank Accounts?** \$ \_\_\_\_\_

List the Names of All Banks in which you have Bank Accounts. \_\_\_\_\_

What is the Most Amount of Money you had in Any Account in the Last Two Years? \_\_\_\_

**Do you Have More than \$100 in Actual Cash?** No Yes Amount \$ \_\_\_\_\_

Have you Closed any Checking accounts, Savings accounts, or CD's or Any other Accounts in the Last 12 Months? No Yes

Bank Name & Address, Date Closed, Account# & Closing Balance: \_\_\_\_\_

Do You Own a Boat or Taxi Medallion or Radio Rights? No Yes

**Are you Expecting a Tax Refund?** No Yes, I Expect \$ \_\_\_\_\_

Does anyone Owe You Money? Or Are you Owed Any Commissions or Fees or otherwise expect any other Payments for any work that you did? No Yes

Do you have a Safety Deposit Box? No Yes in Bank: \_\_\_\_\_

**Do you have A Life Insurance Policy?** Term Whole Life (cash value) NONE

**Do you own Any Stock or Bonds or CD's or Partnerships?** No Yes \_\_\_\_\_

Do you own any Patents or Copyrights or Licenses or Franchises? No Yes

**Do you expect to Receive any Inheritance, or anything of value?** No Yes

Are you Holding any property that belongs to Another Person? No Yes

**Were there any Businesses** that you were the Director, Partner, Officer or Managing Executive or any other ownership within the last Six Years? No Yes

List Business Name, ID# & Address: \_\_\_\_\_

Did you make any payments to any One Creditor more than \$600 within the last 90 days? No Yes \_\_\_\_\_

Did you make any payments to One Family Member more than \$600 within the last year? No Yes \_\_\_\_\_

Did you Ever Transfer Any Money or Assets or Give any Gifts or Have any **Gambling or other Losses** over \$2,000.00? NONE \_\_\_\_\_

**Are You Suing Anyone for Any Reason?** No Yes \_\_\_\_\_  
**ie. A Claim for Personal Injury or Property Loss?** Name of Attorney \_\_\_\_\_

Is Anyone Suing You? No Yes \_\_\_\_\_

Did you Transfer or sell any Property or Stock within the last Six years? No Yes

Did anyone Repossess anything of yours, or did a Bank take any Money from your account against a Debt that You Owed? No Yes \_\_\_\_\_

How much in Total did you Charge in the Last 6 months on Credit Cards? \$ \_\_\_\_\_

**EMPLOYMENT INFORMATION:**

Are you Currently Employed? No Yes Years Employed at This Job: \_\_\_\_\_

Address and Name of Employer: \_\_\_\_\_

How much did you earn so far This Year? \_\_\_\_\_ Job Title: \_\_\_\_\_

How much did you earn Last Year? \_\_\_\_\_ The Year Before? \_\_\_\_\_

**CLIENT'S SECOND INCOME No Yes OR SPOUSE INCOME No Yes**

Are you Currently Employed? No Yes Years Employed at This Job: \_\_\_\_\_

Address and Name of Employer: \_\_\_\_\_

How much did you earn so far This Year? \_\_\_\_\_ Job Title: \_\_\_\_\_

How much did you earn Last Year? \_\_\_\_\_ The Year Before? \_\_\_\_\_

**PAYCHECK INCOME:**

I Received Each Paycheck:  Weekly  Biweekly  Semi-Monthly  Monthly

**OTHER MONTHLY INCOME:**

**Do You Receive Other Monthly Income?**

Unemployment: \$ \_\_\_\_\_

Social Security: \$ \_\_\_\_\_

Workers Compensation: \$ \_\_\_\_\_

Pension: \$ \_\_\_\_\_

Disability: \$ \_\_\_\_\_

Child Support: \$ \_\_\_\_\_

Food Stamps: \$ \_\_\_\_\_

Alimony: \$ \_\_\_\_\_

Rental Income: \$ \_\_\_\_\_

Other Income: \$ \_\_\_\_\_

Business Income: \$ \_\_\_\_\_

Gifts from Family or Friends: \$ \_\_\_\_\_

**No Other Income**

**TOTAL AMOUNT OF DEBT OWED:**

1. Credit Card Debt: \$ \_\_\_\_\_

2. Loans: \$ \_\_\_\_\_

3. Mortgage Debt: \$ \_\_\_\_\_

4. Student Loans: \$ \_\_\_\_\_

5. Other Debt: \$ \_\_\_\_\_

**OTHER INFORMATION:**

Who Referred you to this Law Office? \_\_\_\_\_

**Total Legal Fee & Expenses:** \_\_\_\_\_

**MONTHLY EXPENSES**

Rent or Mortgage: \_\_\_\_\_ Homeowners/Rental Insurance: \_\_\_\_\_

Electric, Gas, Heat: \_\_\_\_\_ Life Insurance: \_\_\_\_\_

Water & Sewer: \_\_\_\_\_ Health Insurance: \_\_\_\_\_

Telephone & Cell: \_\_\_\_\_ Auto Insurance: \_\_\_\_\_

Home Maintenance: \_\_\_\_\_ Car Payments: \_\_\_\_\_

Food & Restaurant: \_\_\_\_\_ Child Support: \_\_\_\_\_  
Court Ordered?  No  Yes

Clothing: \_\_\_\_\_ Support for Dependents: \_\_\_\_\_

Laundry & Dry Cleaning: \_\_\_\_\_ Child Care Expenses: \_\_\_\_\_

Medical & Dental Expenses: \_\_\_\_\_ Educational Materials: \_\_\_\_\_

Public Transportation: \_\_\_\_\_ Job Related Expenses: \_\_\_\_\_

Car - Gas, Oil, Repairs \_\_\_\_\_ Hair Care and Makeup: \_\_\_\_\_

Recreation, Magazines: \_\_\_\_\_ Cable TV and/or Internet: \_\_\_\_\_

Charity: \_\_\_\_\_ Baby Supplies: \_\_\_\_\_

Child Visitation Expenses: \_\_\_\_\_

Other Expenses (List): \_\_\_\_\_ Toiletries: \_\_\_\_\_ Pets: \_\_\_\_\_

**TOTAL EXPENSES: \_\_\_\_\_**

**JACOB SILVER**  
Attorney at Law  
26 Court Street  
Suite 1201  
Brooklyn, N.Y. 11242  
(718) 855-3834  
Fax: (718) 797-4141

**When you come to my office, Please Bring in the Following:**

1. Completely fill out the enclosed Bankruptcy Checklist. No Yes
2. Photo Identification and Social Security Card. No Yes
3. One new or old bill from each creditor that you have. No Yes
4. ALL Pay Stubs from each Job that you and your spouse have received for the Last Sixty Days. If you are self employed, then bring in documents showing your income. No Yes
5. Obtain a list of the amount of monthly income that you have received for Each Month, for the Last Six Months. No Yes
6. Obtain your Most Recent Federal and State Tax Returns. If you misplaced it, then order a free Tax Return Transcript from the IRS, by calling (800) TAX-1040 or by filling out the IRS form f4506t. No Yes
7. If you owe the IRS Taxes, then Call them at (800) TAX-1040 and order the free MFTRA Account Transcript (pronounced “MIFTRA”) for each of the years that you may owe taxes. No Yes
8. If you own a Car or other Vehicle, bring in a statement showing the remaining balance that you still owe. Print out the vehicles blue book value at <http://www.kbb.com>. No Yes
9. If you own a house or other real estate, bring in a mortgage document that lists the total amount that you owe to the lender, as well as any appraisal showing the value of the property. No Yes
10. If you have any Life Insurance Policies with a Cash Value (called Whole Life Policies), contact them and find out how much the cash value is. No Yes
11. Bring in One Bank Statements for Each Bank Account such as each Savings, Checking, or CD’s that you have. No Yes
12. Please bring all Debt Collection Letters that you received from collection agencies and attorneys. I will evaluate whether you may sue them. No Yes

# JACOB SILVER

Attorney at Law

26 Court Street  
Suite 1201  
Brooklyn, N.Y. 11242  
(718) 855-3834

## OFFICE LOCATION

**My office is easily accessible on Court Street in Downtown Brooklyn.**

**My office is on Court Street Between Remsen and Montague Streets,**

**Near the Borough Hall and Jay Street Train stations.**

**Borough Hall Station - 2, 3, 4, 5, R Trains.**

**Jay Street Station - A, C, F Trains.**

### BY BUS:

B25, B26, B37, B38, B41, B45, B51, B52, or B67 to Court Street/Borough Hall Area.

### BY CAR:

#### From Manhattan:

Brooklyn Bridge to Tillary Street. Turn right and travel to Cadman Plaza West. Make left onto Cadman Plaza West. Proceed 4 blocks to Court Street. The office is on the right side

#### From Brooklyn:

BQE/Gowanus West: Exit no: 28a Cadman Plaza West. Make left and proceed 5 blocks to Court Street. The office is on the right side (26 Court Street).

#### From Queens:

West on the BQE/Gowanus Exit number: 28 Cadman Plaza West/Brooklyn Bridge. Make left turn from exit and proceed to Cadman Plaza west. Travel straight 6 blocks to Court Street. The office is on the right side (26 Court Street).

#### From Staten Island:

Staten Island Expressway to Verazzano Bridge. Travel on BQE/Gowanus East and follow directions from Queens as listed above.

